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UTILITY PATENT APPLICATION TRANSMITTAL (for nonprovisional applications under 37 C.F.R. § 1.53(b))	Attorney Docket No.	MFCP.88141
	Express Mail No.	EL276178352

TO: U.S. Patent and Trademark Office
 Box Patent Application
 P.O. Box 2327
 Arlington, VA 22202

Inventor(s): WALTER R. SMITH

Title: METHOD AND SYSTEM FOR RECORDING PROGRAM INFORMATION IN THE EVENT OF A FAILURE

THIS APPLICATION CLAIMS THE BENEFIT OF U.S. PROVISIONAL APPLICATION SN 60/293,506, FILED 5/24/01.

Enclosed are:

<input checked="" type="checkbox"/>	21	pages of specification including abstract
<input type="checkbox"/>	5	sheet(s) of FORMAL drawings
<input type="checkbox"/>		an assignment of the invention to:
<input checked="" type="checkbox"/>		Declaration of Inventor(s): <input checked="" type="checkbox"/> NOT executed <input type="checkbox"/> Copied from a prior application (for contin/div)
<input type="checkbox"/>		small entity status is claimed.
<input type="checkbox"/>		a small entity status was claimed or filed in prior application; status still proper and desired.
<input type="checkbox"/>		Information Disclosure Statement/PTO-1449/Copies of IDS citations.
<input type="checkbox"/>		other:

If a Continuing Application: Check appropriate box, and supply the requisite information below:

<input type="checkbox"/> Continuation	<input type="checkbox"/> Divisional	<input type="checkbox"/> Continuation-in-Part (CIP)	of prior application No.
Prior application information:		Examiner:	Group Art Unit:

CLAIMS AS FILED				
	NUMBER FILED	NUMBER EXTRA	RATE	FEE
BASIC FEE			\$740	\$ 740
TOTAL CLAIMS	12 - 20 =	0	X \$ 18	\$ -0-
INDEPENDENT CLAIMS	4 - 3 =	1	X \$ 84	\$ 84
MULTIPLE DEPENDENT CLAIM PRESENT			\$280	\$ -0-
* Number extra must be zero or larger				TOTAL \$ 824
If applicant has small entity status under 37 CFR 1.9 and 1.27, then divide total fee by 2, and enter amount here.				SMALL ENTITY TOTAL \$ -0-

<input checked="" type="checkbox"/>	A check in the amount of \$ 824 to cover the filing fee is enclosed.
<input checked="" type="checkbox"/>	Commissioner is hereby authorized to charge/credit Deposit Acct. No. 19-2112 as described below. Enclosed is a duplicate of this sheet.
<input type="checkbox"/>	Charge the amount of \$ _____ as filing fee.
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Scott B. Strohm
 Signature

11/21/01
 Date

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